

FACSIMILE COVER SHEET

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August 11, 2006

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TO: Examiner Foster

GROUP: 1643

FAX NUMBER: 571-273-8300

ATTORNEY DOCKET NO.: WON-0002

SERIAL NO.: 10/511,719

FILED: November 26, 2004

NUMBER OF PAGES:

MESSAGE: Attached please find Amendment Transmittal Letter; Reply to Restriction Requirement mailed July 14, 2006 and Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Registration No. 38,350

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Kim et al.

Docket No.

WON-0002

Application No.

10/511,719

Filing Date

November 26, 2004

Examiner

Foster, Christine E.

Group Art Unit

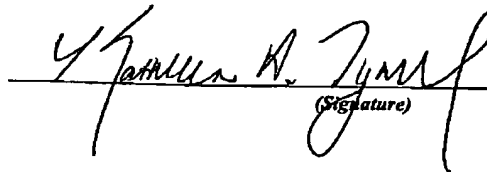
1643

Invention: The Method for Measuring the Amount of Beta IG-H3 Protein and Diagnostic Kit Using the Same

I hereby certify that this

Reply to Restriction Requirement*(Identify type of correspondence)*is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300)

on

August 11, 2006*(Date)*Kathleen A. Tyrrell*(Typed or Printed Name of Person Signing Certificate)*
(Signature)

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AUG 11 2006

AMENDMENT TRANSMITTAL LETTER (Small Entity)

Applicant(s): Kim et al.

Docket No.

WON-0002

Application No. 10/511,719	Filing Date November 26, 2004	Examiner Foster, Christine E.	Customer No. 26259	Group Art Unit 1643	Confirmation No. 9860
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Invention: The Method for Measuring the Amount of Beta IG-H3 Protein and Diagnostic Kit Using the Same

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

☐ Applicant claims small entity status. See 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	16 -	20 =	0	x \$25.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0	x \$100.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Kathleen A. Tyrrell
Signature
Kathleen A. Tyrrell, Reg. No. 38,350

Dated: August 11, 2006

I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

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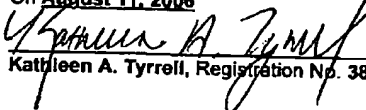
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: WON-0002
Inventors: Kim et al.
Serial No.: 10/511,719
Filing Date: November 26, 2004
Examiner: Foster, Christine E.
Customer No: 26259
Group Art Unit: 1643
Confirmation No.: 9860
Title: The Method for Measuring the Amount
of Beta IG-H3 Protein and
Diagnostic Kit Using the Same

Certificate of Facsimile Transmission

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On August 11, 2006


Kathleen A. Tyrrell, Registration No. 38,350

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P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Reply to Restriction Requirement

This is a reply to the Restriction Requirement mailed
July 14, 2006 setting a one (1) month statutory period for
response. Please enter the following remarks into the
record.

Remarks begin on page 2 of this paper.